Application Data Sheet APPLICATION INFORMATION

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Application Number::	
Filing Date::	
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD Disks:	
Number of Copies of CDs::	
Sequence Submission?::	Paper
Computer Readable From (CRF)?:: Yes	
Number of Copies of CRF::	1
Title::	SCYTOVIRINS AND RELATED CONJUGATES,
	FUSION PROTEINS, NUCLEIC ACIDS,
	VECTORS, HOST CELLS, COMPOSITIONS,
	ANTIBODIES, AND METHODS OF USING
	SCYTOVIRINS
Attorney Docket Number::	231119
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	•
Total Drawing Sheets::	4
Small Entity?::	No
Latin Name::	
Variety denomination name::	•
Petition Included?::	No
Petition Type::	
Licensed US Govt. Agency::	•

APPLICANT INFORMATION

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Michael

Middle Name:: R

Family Name:: BOYD

Name Suffix::

City of Residence:: Mobile

State or Prov. of Residence:: AL

Country of Residence:: US

Street of mailing address:: 109 Austil Avenue

City of mailing address:: Mobile

State or Province of mailing address:: AL

Country of mailing address:: US

Postal or Zip Code of mailing address:: 36608

Inventor Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Heidi

Middle Name::

Family Name:: BOKESCH

Name Suffix::

City of Residence:: Frederick

State or Prov. of Residence:: MD

Country of Residence:: US

Street of mailing address:: 6782 Sunny Brook Drive

City of mailing address:: Fredrick

State or Province of mailing address:: MD

Country of mailing address:: US

Postal or Zip Code of mailing address:: 21702

Inventor Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Barry

Middle Name:: R

Family Name:: O'KEEFE

Name Suffix::

City of Residence:: Fredrick

State or Prov. of Residence:: MD

Country of Residence:: US

Street of mailing address:: 8110 Glendale Drive

City of mailing address:: Fredrick

State or Province of mailing address:: MD.

Country of mailing address:: US

Postal or Zip Code of mailing address:: 21702

Inventor Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Tawnya

Middle Name:: C

Family Name:: McKEE

Name Suffix::

City of Residence:: Gaithersburg

State or Prov. of Residence:: MD

Country of Residence:: US

Street of mailing address:: 17500 Taunton Drive

City of mailing address:: Gaithersburg

State or Province of mailing address:: MD

Country of mailing address:: US

Postal or Zip Code of mailing address:: 20877

CORRESPONDENCE INFORMATION

Correspondence Customer Number::

45733

Phone::

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Fax::

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E-mail Address::

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REPRESENTATIVE INFORMATION

Representative Customer Number 1::

45733

Representative Designation::

Registration Number::

Representative Name::

DOMESTIC PRIORITY INFORMATION

Application::

Continuity Type::

Parent Application::

Parent Filing Date::

This Application

National Stage of

PCT/US03/15991

05/15/03

PCT/US03/15591

An application

claiming the benefit

under 35 USC

119(e)

05/16/02 60/381,322

ASSIGNEE INFORMATION

Assignee name::

The Government of the United States of America,

Represented by the Secretary Dept. of Health and

Human Services

Street of mailing address:: Office of Technology Transfer

6011 Executive Boulevard, Suite 325

Page #4

City of mailing address::

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State or Province of

mailing address::

MD

Initial 11/10/04

Country of mailing address::

US

Postal or Zip Code of mailing address::

20852